

MICHIGAN EMERGENCY TELEPHONE SERVICE COMMITTEE

INVOICE APPROVAL REQUEST

COMPANY NAME: _____

FCC LICENSE NUMBER: _____ FEDERAL ID NUMBER: _____
 (Federal Communications Commission)

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

CONTACT PERSON: _____ TELEPHONE: _____ E-MAIL: _____

DATE OF (ANTICIPATED) EXPENDITURE	PHASE 1 (CHECK ONE)	PHASE 2 (CHECK ONE)	EXPENDITURE	JUSTIFICATION OF EXPENDITURE	AMOUNT

INVOICE TOTAL **\$**

I CERTIFY THAT THE GOODS AND/OR SERVICES HAVE BEEN PURCHASED/ARE ONLY BEING PURCHASED FOR FCC WIRELESS ORDER COMPLIANCE:

 (SIGNATURE) (PRINT NAME) (TITLE) (DATE SIGNED)

Remit To: Emergency Telephone Service Committee
 714 S. Harrison Road
 East Lansing, MI 48823

Questions/Telephone: (517) 336-2666

Approved by CMRS Subcommittee for Forwarding to ETSC on: _____
 Approved by ETSC on: _____